

JUN 24 2004

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PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	38-21(52947)B
First Named Inventor	Charles L. Armstrong
COMPLETE IF KNOWN	
Application Number	10/708,725
Filing Date	March 19, 2004
Group Art Unit	Unknown
Examiner Name	Unknown

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A Novel Method for Production of Transformed Dihaploid Corn Plants

the specification of which

(Title of the Invention)

 is attached hereto

OR

 was filed on (MM/DD/YYYY) **March 19, 2004** as United States Application Number or PCT InternationalApplication Number **10/708,725** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/320,021	March 19, 2003	<input type="checkbox"/>

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number <i>(if applicable)</i>

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number **27161** → Place Customer Number Bar Code Label here

Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number or Bar Code Label **27161** OR Correspondence address below

Name					
Address					
Address					
City			State		ZIP
Country	Telephone		Fax		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor				
---------------------------------	---	--	--	--	--

Given Name (first and middle [if any])	Family Name or Surname				
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Charles L.	Armstrong				
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Inventor's Signature	<i>Charles L Armstrong</i>					Date	4/2/04
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Residence: City	St. Charles	State	MO	Country	63304	Citizenship	U.S.
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Post Office Address	6 Oakside Court						
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Post Office Address							
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City	St. Charles	State	MO	ZIP	63304	Country	U.S.A.
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Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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PTO/SB/02A (3-97)

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 11 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Carl Frederick		Behr					
Inventor's Signature	<i>Carl J Behr</i>					Date	<i>4-16-04</i>
Residence: City	Wildwood	State	MO	Country	U.S.A.	Citizenship	U.S.
Post Office Address	1431 Wellington View Lane						
Post Office Address							
City	Wildwood	State	MO	ZIP	63005	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Gurdip S.		Brar					
Inventor's Signature	<i>Gurdip S Brar</i>					Date	<i>4-20-04</i>
Residence: City	Middleton	State	WI	Country	U.S.A.	Citizenship	U.S.
Post Office Address	1312 Sweeney Drive						
Post Office Address							
City	Middleton	State	WI	ZIP	53562	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
David R.		Duncan					
Inventor's Signature	<i>David R. Duncan</i>					Date	<i>4-6-04</i>
Residence: City	St. Charles	State	MO	Country	U.S.A.	Citizenship	U.S.
Post Office Address	3439 Tiverton Drive						
Post Office Address							
City	St. Charles	State	MO	ZIP	63301	Country	U.S.A.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Terry		Foley					
Inventor's Signature	<i>Terry J Foley</i>				Date	<i>04/13/04</i>	
Residence: City	Williamsburg	State	IA	Country	U.S.A.	Citizenship	U.S.
Post Office Address	129 Country Club Drive						
Post Office Address							
City	Williamsburg	State	IA	ZIP	52361	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Lorelei C.		Marshall					
Inventor's Signature	<i>Lorelei C Marshall</i>				Date	<i>04/13/04</i>	
Residence: City	Iowa City	State	IA	Country	U.S.A.	Citizenship	U.S.
Post Office Address	7 Glencrest Drive						
Post Office Address							
City	Iowa City	State	IA	ZIP	52246	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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